



Gateway Pregnancy
Centers
Irvington and Elizabeth, NJ
(973) 754-8378
www.gateway.org
dean@gateway.org

Sponsor Pledge Form

Walker's name: _____
Address: _____
Town: _____ Zip code: _____
Telephone number with area code: () _____
Church /youth group: _____

Please print all information and circle pledge desired

First name	Last name	Apt#	<input type="checkbox"/> PAID				
Address							
City	State	Zip code	Tel#				
Circle one	\$15	\$20	\$25	\$50	\$75	\$100	Other \$ _____

First name	Last name	Apt#	<input type="checkbox"/> PAID				
Address							
City	State	Zip code	Tel#				
Circle one	\$15	\$20	\$25	\$50	\$75	\$100	Other \$ _____

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Address							
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Address							
City	State	Zip code	Tel#				
Circle one	\$15	\$20	\$25	\$50	\$75	\$100	Other \$ _____

Please remember the ZIP CODES!

Gateway Pregnancy Centers Walk for Life



*Free T-shirt
for all who
raise \$150.*

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Total pledges on this sheet. \$ _____